P.O. Box 12070

		/ OFFICEHOLDER FINANCE REPORT	3742	FORM C/OH COVER SHEET PG 1
	The C/OH INSTRUCTION	Guide explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers)	2 Total pages filed: 32
3	CANDIDATE / OFFICEHOLDER NAME	TITLE FIRST Travis County Attorney/ Ke NICKNAME LAST Oden	nneth R.	DANA COUNTY
4	CANDIDATE / OFFICEHOLDER ADDRESS Change of Address		TY; STATE; ZIP CODE	3 29 PH '9
5	CAMPAIGN TREASURER NAME	TITLE TRAVIS County Attorney Kenneth NICKNAME LAST Oden	R. SUFFIX	Receipt # 6 HD / PM Amount Onte Processed JON 15, 1998
6	CAMPAIGN TREASURER ADDRESS (Residence or business)	street address (No Po Box PLEASE): APT/SUI 1506 Gaston Ave Austin, TX 78703	TES, CITY: STATE,	ZIP CODE
7	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 474-4156	EXTENSION	
8	REPORT TYPE	January 15		15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)
9	PERIOD COVERED	Month Day Year THRO	NOORH Day	/ 98
10	ELECTION	Month Day Year ELECTION TO		General Special
11	OFFICE	OFFICE HELD (* =>y) Travis County Attorney	12 OFFICE SOUGHT (# love	· :
13	DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	Direct campaign expenditures are campaign exp Candidates are required to disclose this information Name	enditures made by others without the ca only if they receive notification of the di	andidate's prior consent or approval, krect campaign expenditure. ↔
	. addational pages	Address / PO Box; Apt. / Suite #, City; State.	Zip Code	
		GO TO	PAGE 2	

CANDIDATE / OFFICEHOLDER REPORT: **SUPPORT & TOTALS**

FORM C/OH COVER SHEET PG 2

			15 ACCOUNT # (Ethics Commission filers)
14 C/OH NAME Kenneth Ode	n .		S ACCOUNT W (EDICS CONTRIBSSON METS)
16 SUPPORTING POLITICAL COMMITTEE(S)	This listing include have been made with	tes political expenditures by political committees to support the candidate out the candidate's or officeholder's knowledge or consent. Candidates a sy receive notice of such expenditures.	e / officeholder. These expenditures may nd officeholders are required to report this
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL SPECIFIC	COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME	
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS	·
7 NO REPORTABLE ACTIVITY	Check here if	no reportable activity occurred during this reporting period. (Sign affidavit be	low and submit pages 1 and 2 only.}
18 CONTRIBUTION TOTALS	1. TOTAL PLEDG	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ N/A
		POLITICAL CONTRIBUTIONS RITHAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$12,405.00
EXPENDITURE TOTALS			
	4. TOTA	POLITICAL EXPENDITURES	\$5,046.99
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T AY OF THE REPORTING PERIOD	\$ N/A
19 AFFIDAVIT			•
		is true and correct and includes all me under Title 15. Election Code.	perjury, that the accompanying report information required to be reported by didate or Officeholder
AFFIX NOTARY STAM	MP / SEAL ABOVE		1511
Sworn to and subscriber		aid this the and and seal of office.	15th day of January
Signature of officer a	administering oath	Print name of officer administering oath	n admin aid r

P.O. Box 12070 (512) 463-5800 Texas Ethics Commission POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 Total pages Schedule A: The Instruction Guide explains how to complete this form. 1 of 18 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Ken Oden 7 Amount of In-kind contribution Date 5 Full name of contributor out of state PAC contribution (\$) description(if applicable) 9/5/97 James Allison 50.00 6 Contributor address; City; State; Zip Code PO Box 12215 Austin, TX 78711 10 Employer (optional) Principal occupation Amount of In-kind contribution Date Full name of contributor Out of state PAC description(if applicable) contribution (\$) 9/13/97 Rooster Andrews 100.00 Contributor address; City; State; Zip Code PO Box 2163 Employer (optional) Principal occupation Amount of In-kind contribution Full name of contributor Date out of state PAC contribution (\$) description(if applicable) 9/9/97 . Walker Arenson 100.00 Contributor address; City; State; Zip Code PO Box 160580 Austin, TX 78716 Employer (optional) Principal occupation Full name of contributor Amount of In-kind contribution Date out of state PAC contribution (\$) description(if applicable) 8/11/97 Deane Armstrong. 25.00 Contributor address; City; State; Zip Code 17917 Lafayette Park Jönestown TX 78641 Employer (optional) Principal occupation Full name of contributor Amount of In-kind contribution Date out of state PAC contribution (\$) description(if applicable) 9/18/97 Jim Arnold, Jr 25.00 Contributor address; City; State; Zip Code 406 Sterzing St Austin, TX 78704 Principal occupation Employer (optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

P.O. Box 12070

SCHEDULE A

OTHER THAN PLEDGES OR LOANS					
The Instruction	dule A: 2 of 18				
2 FILER NAM Ken Oden	E		3 ACCOUNT # (Et	nics Commission filers)	
4 Date	5 Full name of contributor	out of state PAC	7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)	
9/3/:97	Robert Baldwin III			'	
	6 Contributor address; City; State; Zip Code		100.00	 	
	PO Box 1526 Austin, TX 78767				
9 Principal occ	upation .	10 Employer (option	al)		
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)	
9/10/97	Ben Barnes			1	
	Contributor address; City; State; Zip Code		250.00	! !	
	98 San Jacinto #200 Austin, T	78701			
Principal occ	upation	Employer (optional)			
Date	Full name of contributor	out of state PAC	Amount of contribution (S)	In-kind contribution description(if applicable)	
9/1/97	Karl Bayer Contributor address; City; State; Zip Code		100.00	!	
	114 W. 7th Street #900 Austin,	, TX 78701			
Principal occ	pupation	Employer (option	nal)		
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)	
9/5/97	Betty Blackwell Contributor address; City; State; Zip Code		100.00		
	812 San Antonio #415 Austin, 7	TX 78701		1	
Principal occ		Employer (option	nal)		
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)	
9/5/97	Roy & Ann Butler Contributor address; City; State; Zip Code		100.00		
	Tow Niles Dr. Austin, TX 78703			1	
Principal oc		Employer (option	nai)	1	
		.1			

POLITICAL CONTRIBUTI	ONS
OTHER THAN PLEDGES	OR LOANS

SCHEDULE A

The Instructi	ON GUIDE explains how to complete this form.		1 Total pages Sche	dule A: 3 of 18
FILER NAM Ken Oden			3 ACCOUNT # (Et	nics Commission filers)
4 Date	5 Full name of contributor	Out of state PAC	7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)
10/1/97	Dan Byrne 6 Contributor address; City; State; Zip Code	· · · · · · · · · · · · · · · · · · ·	50.00	!
	98 San Jacinto #2000 Austin, T	X 78701	,	l
9 Principal oc	cupation	10 Employer (option	nal)	
Date 9/11/97	Full name of contributor John Campbell Contributor address; City; State; Zip Cod		Amount of contribution (\$)	In-kind contribution description(if applicable)
	805 W. 10th #400 Austin, TX 7	8701 Employer (option	onal)	
Principal oc	cupation	Zinpoje: (optients)		
Date	Full name of contributor William O. Cromwell	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
9/4/97	Contributor address; City; State; Zip Cod	ie	25.00	!
	4015 Walnut Clay Dr Austin, 1			
Principal oc	cupation	Employer (option	onal)	
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
9/3/97	Ronald Earle Contributor address; City; State; Zip Cod	de	250.00	
	PO Box 2092 Austin, TX 7876	8		<u> </u>
Principal of		Employer (opti	onal)	
Date	Full name of contributor	ut of state PAC	Amount of contribution (\$)	In-kind contribution t description(if applicable)
9/10/97	Wally Ellinger Contributor address; City; State; Zip Co	de	20.00	
	2905 Richard Lane Austin, TX	78703		
Principal o		Employer (opt	ional)	

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

* Texas Ethics Commission

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

OTTLE	THAN I ELDOLO ON LOVIN			
The Instruction	N GUIDE explains how to complete this form.	1 Total pages Sche	1 Total pages Schedule A: 4 of 18	
2 FILER NAME			3 ACCOUNT # (Eth	ics Commission filers)
Ken Oden				
4 Date	5 Full name of contributor	out of state PAC	7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)
9/3/97	Ray Farabee 6 Contributor address; City; State; Zip Code		100.00	
	201 W 7th Street Austin, TX 7870)1		
9 Principal occu	pation	10 Employer (option	al)	
Date	Full name of contributor	out of state PAC	Amount of	In-kind contribution
9/5/97	Charlotte Flynn		contribution (\$)	description(if applicable)
.,.,.	Contributor address; City; State; Zip Code		25.00	1
	7710 West Rim Austin, TX 78731			1
Principal occu	pation	Employer (optional)		
Date	Full name of contributor	out of state PAC	Amount of	In-kind contribution
9/9/97	Gene Fondren		contribution (\$)	description(if applicable)
	Contributor address; City; State; Zip Code		250.00]
	PO Box 1028 Austin, TX 78767			1
Principal occu	I	Employer (option	al)	
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
9/12/97	Ned Granger Contributor address; City; State; Zip Code		500.00	
	605 W. 10th Austin, TX 78701]
Principal occi		Employer (option	nal)	
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
9/4/97	Chris Gunter Contributor address; City; State; Zip Code		100.00	
	600 W. 9th Street Austin, TX 787	701		1
Principal occi		Employer (option	nal)	

POLITICA	AL CC	NTRIBUTI	ONS	•
OTHER 1	THAN	PLEDGES	OR	LOANS

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1-800-325-8506

OTHER THAN PLEDGES OR LOANS						
The Instruction	N GUIDE explains how to complete this form.		1 Total pages Scher	dule A: 5 of 18		
2 FILER NAME Ken Oden			3 ACCOUNT # (Eth	ics Commission filers)		
4 Date	5 Full name of contributor	out of state PAC	7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)		
9/15/97	Kathleen O. Hackett			description (iii depriodate)		
	6 Contributor address; City; State; Zip Code		5.00			
	7004 Fred Morse Dr. Austin, TX	78723				
9 Principal occu	pation	10 Employer (option	al)			
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)		
9/5/97	Richard Hardin		contribution (s)	description(ii applicable)		
	Contributor address; City; State; Zip Code		100.00			
PO Box 160217 Austin, TX 78716						
Principal occu	pation	Employer (option	Employer (optional)			
Date	Full name of contributor	out of state PAC	Amount of	In-kind contribution		
9/9/97	H.S. Harris		contribution (\$)	description(if applicable)		
	Contributor address; City; State; Zip Code		100.00			
	8701 Mopac #400 Austin, TX 7875	59				
Principal occu	upation	Employer (option	pal)			
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)		
9/16/97	Michael Hebert Contributor address; City; State; Zip Code		100.00	 		
	1301 West 25th #545 Austin, TX	78705				
Principal occi	upation	Employer (option	nal)			
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)		
9/5/97	Becca Hensley & Carl Williams		, , ,	1		
:	Contributor address; City; State; Zip Code		100.00	į		
	2405 Indian Trail Austin, TX 78	3703		<u> </u> 		
Principal occ		Employer (option	nal)			

Texas Ethics Commission

POLITICAL CONTRIBUTIONS

SCHEDULE A

(512) 463-5800

OTHER THAN PLEDGES OR LOANS						
The Instruction	N GUIDE explains how to complete this form.		1 Total pages Sche	^{dule A:} 6 of 18		
2 FILER NAME	=		3 ACCOUNT # (Et	ics Commission filers)		
Ken Oden						
4 Date	5 Full name of contributor	out of state PAC	7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)		
9/11/97	Jack Holford					
	6 Contributor address; City; State; Zip Code		100.00			
	3409 Westlake Dr Austin, TX 78					
9 Principal occu	pation	10 Employer (option	al)			
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)		
9/3/97	Sam Johnson			I		
	Contributor address; City; State; Zip Code		40.00			
	600 Congress Ave #1500 Austin,	TX 78701		<u> </u>		
Principal occu	pation .	Employer (option	al)			
Date	Full name of contributor	out of state PAC	Amount of	In-kind contribution description(if applicable)		
9/3/97	Cary Jones		contribution (\$)	1		
	Contributor address; City; State; Zip Code		100.00	 		
	603 W. 12th St. Austin, TX 787	01		1		
Principal occu	pation	Employer (option	nal)			
Date		out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)		
9/10/97	Willie Mae Kirk			1		
	Contributor address; City; State; Zip Code		50.00			
	1908 Maple Austin, TX 78702					
Principal occu	upation	Employer (option	nal)			
Date	Full name of contributor	out of state PAC	Amount of	In-kind contribution		
9/7/97	Willie Kocurek		contribution (\$)	description(if applicable)		
	Contributor address; City; State; Zip Code	· · · · · · · · · · · · · · · · · · ·	25.00			
·	513 W. 41st Street Austin, TX	78751				
Principal occi	upation	Employer (option	nai)			

Austin, Texas 78711-2070 P.O. Box 12070 (512) 463-5800 1-800-325-8506 Texas Ethics Commission POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 Total pages Schedule A: The Instruction Guide explains how to complete this form. 7 of 18 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Ken Oden 7 Amount of In-kind contribution 5 Full name of contributor out of state PAC Date contribution (\$) description(if applicable) 9/13/97 Anne Kohler 6 Contributor address; City; State; Zip Code 50.00 3902 Idelewild Austin, TX 78731 10 Employer (optional) Principal occupation Amount of In-kind contribution Date Full name of contributor Out of state PAC contribution (\$) description(if applicable) 10/10/97 Emma Long Contributor address; City; State; Zip Code 50.00 1306 Bradwood Rd Austin, TX 78722 Employer (optional) Principal occupation Amount of In-kind contribution Full name of contributor out of state PAC Date contribution (\$) description(if applicable) Joe Long 9/16/97 250.00 Contributor address; City; State; Zip Code PO Box 3550 Austin, TX 78764 Principal occupation Employer (optional) In-kind contribution Amount of Date Full name of contributor out of state PAC contribution (\$) description(if applicable) 9/25/97 Frank McBee 100.00 Contributor address: City; State; Zip Code 705 San Antonio Austin, TX 78701 Principal occupation Employer (optional) Amount of In-kind contribution Full name of contributor out of state PAC Date description(if applicable) contribution (\$) 9/2/97 Dudley & Maline McCalla 50.00 Contributor address; City; State; Zip Code

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Employer (optional)

720 Brazos Street #200 Austin, TX 78701

Principal occupation

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

P.O. Box 12070

SCHEDULE A

OTTILIV	THAN I EEDOZO OK ZO, III					
The Instruction	GUIDE explains how to complete this form.		1 Total pages Sche	dule A: 8 of 18		
2 FILER NAM Ken Oden			3 ACCOUNT# (Eth	nics Commission filers)		
4 Date	5 Full name of contributor	out of state PAC	7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)		
8/28/97	B.J. McCombs		Commodition (4)	description(ii application)		
, ,	6 Contributor address; City; State; Zip Code		500.00			
	PO Box BH003 San Antonio TX 782					
9 Principal occ	upation .	10 Employer (option	ial)			
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)		
9/15/97	Mark McCrimmon		Contribution (9)	l description(ii applicatio)		
	Contributor address; City; State; Zip Code		100.00	1		
	1504 West Ave. Austin, TX 78701					
Principal occ	cupation	Employer (optional)				
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)		
9/14/97	Aileen McDaniel		contribution (s)	description(ii applicable)		
	Contributor address; City; State; Zip Code		50.00	! !		
	5816 Gloucester Austin, TX 7872	.3				
Principal oc	cupation	Employer (option	nal)			
Date	Full name of contributor	out of state PAC	Amount of	In-kind contribution		
10/14/97	R.E. Merritt		contribution (\$)	description(if applicable)		
20, 21, 01	Contributor address; City; State; Zip Code		500.00			
	PO Box 9802591 Austin, TX 78766	5		<u> </u>		
Principal oc	cupation	Employer (optio	nal)			
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)		
9/5/97	Bill Milburn					
	Contributor address; City; State; Zip Code		100.00	i		
	PO Box 26507 Austin, TX 78755	٠				
Principal of		Employer (option	onal)			

Austin, Texas 78711-2070

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

1-800-325-8506

The Instruction	Guide explains how to complete this form.		1 Total pages Sche	1 Total pages Schedule A: 9 of 18	
2 FILER NAME			3 ACCOUNT# (Eth	nics Commission filers)	
Ken Oden					
4 Date	5 Full name of contributor	out of state PAC	7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)	
9/9/97	Joe Milner 6 Contributor address; City; State; Zip Code		100.00		
	1301 Nueces #200 Austin, TX 787		- "		
9 Principal occu	pation	10 Employer (option	al)		
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)	
9/6/97	John F. Morehead Contributor address; City; State; Zip Code		50.00		
	98 San Jacinto Blvd #1400 Austi	n, TX 78701 Employer (option		<u> </u>	
Principal occu					
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)	
9/8/97	David Nagle Contributor address; City; State; Zip Code		200.00	 	
	901 Mopac South #495 Austin, TX	78746			
Principal occu	pation	Employer (option	al)		
Date 9/3/97	Full name of contributor [George & Virginia Nokes	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)	
97 37 37	Contributor address; City; State; Zip Code		100.00		
	1801 Lavaca #6H Austin, TX 7870	1		1	
Principal occu	upation	Employer (option	nal)		
Date	•	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)	
9/12/97	Joe Osborn Contributor address; City; State; Zip Code		50.00	1	
	515 Congress Ave #1700 Austin,	TX 78701			
Principal occ	upation	Employer (option	nal)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

P.O. Box 12070

SCHEDULE A

(512) 463-5800

OTHER	THAIT I EEDOLO OK LOVIII			
The Instruction	N GUIDE explains how to complete this form.		1 Total pages Sche	dule A: 10 of 18
2 FILER NAME	E		3 ACCOUNT # (Eth	nics Commission filers)
Ken Oden				
4 Date		out of state PAC	7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)
9/19/97	Janis & Joe Pinnelli 6 Contributor address; City; State; Zip Code		50.00	
	PO Box 50038 Austin, TX 78763			
9 Principal occu	pation	10 Employer (option	al)	
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
9/16/97	Bent Pluymen Contributor address; City; State; Zip Code		250.00	
	8140 Mopac II-150 Austin, TX 78			
Principal occu	pation	Employer (option	al)	
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
9/10/97	Edward Safady Contributor address; City; State; Zip Code		100.00	1
	5608 Palisade Ct. Austin, TX 78	3731		
Principal occi	upation	Employer (option	al) .	
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
9/4/97	Irwin Salmanson Contributor address; City; State; Zip Code		100.00	<u> </u>
	4702 Cat Mountain Dr. Austin, T	X 78731		
Principal occ	upation	Employer (option	nal)	
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
9/8/97	Wallace H. Scott Contributor address; City; State; Zip Code		100.00	
	600 Congress Ave #1500 Austin,	TX 78701		
Principal occ	upation	Employer (option	nal)	
				

P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506 Taxas Ethics Commission **POLITICAL CONTRIBUTIONS** SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 Total pages Schedule A: The Instruction Guide explains how to complete this form. 11 of 18 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Ken Oden In-kind contribution Amount of Date Full name of contributor Dut of state PAC Amount of Tocontribution (\$) description(if applicable) 9/4/97 Theodore Siff 50.00 6 Contributor address; 1809 Palma Plaza Austin, TX 78703 10 Employer (optional) Principal occupation Amount of In-kind contribution Out of state PAC Full name of contributor Date contribution (\$) description(if applicable) 9/9/97 Gregory Soechting 25.00 Contributor address; State: Zip Code 2604 Jarratt Ave Austin, TX 78703 Employer (optional) Principal occupation In-kind contribution Amount of Out of state PAC Date Full name of contributor description(if applicable) contribution (\$) 10/6/97 Ford & Ferraro 250.00 Contributor address: City; State; Zip Code 98 San Jacinto Blvd. #2000 Austin, TX 78701 Employer (optional) Principal occupation in-kind contribution Amount of OAT of state PAC Full name of contributor Date description(if applicable) contribution (\$) 9/10/97 Graves, Dougherty, Hearon & Moody City; State; Zip Code Contributor address: 250.00 PO Box 398 Austin, TX 78767 Employer (optional) Principal occupation In-kind contribution Amount of Full name of contributor Dut of state PAC Date description(if applicable) contribution (\$) 9/5/97 Mallios & Associates..... City; State; Zip Code 250.00 Contributor address: 1607 West Ave Austin, TX 78701 Employer (optional) Principal occupation

1-800-325-8506

Austin, Texas 78711-2070

POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS Total pages Schedule A: The Instruction Guide explains how to complete this form. 12 Of 18 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Ken Oden Amount of Ti In-kind contribution Full name of contributor Out of state PAC Date description(if applicable) 9/10/97 Shields & Rusk 200.00 6 Contributor address; City; State; Zip Code 910 Lavaca St Austin, TX 78701 10 Employer (optional) Principal occupation In-kind contribution Amount of Out of stude PAC Full name of contributor Date description(if applicable) contribution (\$) 9/9/97 Slack & Davis 250.00 City: State; Zip Code Contributor address; 8911 Capital of Texas Hwy #2110 Austin, TX 78759 Employer (optional) Principal occupation In-kind contribution Amount of Full name of contributor Date contribution (\$) description(if applicable) 9/5/97 Whitehurst, Harkness, Watson, London, Ozmun. City: State; Zip Code 250.00 Contributor address; PO Box 1802 Austin, TX 78767 Employer (optional) Principal occupation in-kind contribution Amount of Out of state PAC Full name of contributor Date description(if applicable) contribution (\$) 9/15/97 Royce Faulkner City: State; Zip Code Contributor address; 250.00 PO Box 722 Austin, TX 78767 Employer (optional) Principal occupation in-kind contribution Amount of CAS elaste to two Full name of contributor Date contribution (\$) description(if applicable) 9/18/97 Robert Ettinger 50.00 City: State: Zip Code Contributor address; 2515 Winstead Austin, TX 78703 Employer (optional) Principal occupation ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

P.O. Box 12070

OTHER	THAN PLEDGES OR LOANS	•		
The instruct	юм Guide explains how to complete this form.		1 Total pages Schedu	13 of 18
FILER NAME			3 ACCOUNT # (Esta	Commission filers)
Ken Oder			-	
Date	5 Full name of contributor	out of state PAC	7 Amount of 7 8 contribution (5)	in-kind contribution description(if applicable)
9/18/97	John Pringle	·	.] '	• • • • • • • • • • • • • • • • • • • •
	6 Contributor address; City; State; Zip Code		250.00	
	•			
	807 Brazos #603 Austin, TX 7870	10 Employer (optiona	ah	
Principal occu	pation		··, 	
Date	Full name of contributor	out of state PAC	Amount of , contribution (\$)	tn-kind contribution description(if applicable)
16/97	John Robinson			
	Contributor address; City: State; Zip Code		100.00	
			!	
	PO Box-9556 Austin, TX 78766	Employer (option	1	
Principal occi	pation			
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
9/17/97	Al Robinson	,		
	Contributor address: City; State; Zip Code		100.00	•
	PO Box 9556 Austin, TX 78766			
Principal occ	upation	Employer (option	181)	
Date	Full name of contributor	Out of state PAC	Amount of contribution (\$)	In-kind contribution description(# applicable)
/18/97	Jenkins & Deats			
	Contributor address: City; State; Zip Code		50.00	
•	327 Congress Ave #300 Austin, T	X 78701		
Principal oc	supetion	Employer (optio	nai)	
Date	Full name of contributor	Out of state PAC	Amount of	In-kind contribution description(if applicable)
			contribution (\$)	gesarpuori(ii spyriostrie)
9/18/97	Saegert, Angenend & Augustine Contributor address: City: State: Zip Code	• • • • • • • • • • • • • •	50.00	1
	Common Co	•		j
	PO Box 410 Austin, TX 78767			
Principal of		Employer (option	onal) •	
	•			
	4	•	•	•

Printed on recycled paper

POLITICAL CONTRIBUTIONS

P.O. Box 12070

SCHEDULE A

UINER	THAN PLEDGES ON LOAN			
The Instructi	ON GUIDE explains how to complete this form.		1 Total pages Sche	dule A: 14 of 18
2 FILER NAM Ken Oden			3 ACCOUNT# (Et	nics Commission filers)
4 Date	5 Full name of contributor	out of state PAC	7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)
10/24/97	Lowell Lebermann		(0)	,
	6 Contributor address; City; State; Zip Code		100.00]
	3834 Promontory Point Austin, T			
9 Principal occ	cupation .	10 Employer (option	nal)	
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
11/3/97	Jay Brim		Commodition (c)	1
	Contributor address; City; State; Zip Code		100.00	1
	4906 Timberline Austin, TX 7874			
Principal oc	cupation	Employer (option	nal)	
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
11/1/97	Richard Gray			1
	Contributor address; City; State; Zip Code		100.00	1
	900 West Ave Austin, TX 78701			1
Principal oc	cupation	Employer (optio	nai)	
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
9/29/97	Jackson, Bingaman, Dufour			1
	Contributor address; City; State; Zip Code		100.00	
	409 W. 14th Street Austin, TX 7	8701		<u> </u>
Principal oc	ccupation	Employer (optio	nal)	
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
10/10/97	Fitzgerald & Meissener			1
	Contributor address; City; State; Zip Code		500.00	1
	812 San Antonio #400 Austin, TX	78701		
Principal of		Employer (option	onal)	
		1		

xas Ethics Commi	ssion P.O. Box 12070	Austin, Texas 7871	1-2070	(512)4	63-5800	1-800-325-8506
	CAL CONTRIBUT		S		SCHE	DULE A
The Instruction	N Guide explains how to compl	ete this form.		1 Total pages Sche	dule A: 15 c	of 18
FILER NAME	· ·			3 ACCOUNT# (Eth	nics Commission file	s)
Ken Oden						
Date	5 Full name of contributor		out of state PAC	7 Amount of contribution (\$)	. •	contribution (if applicable)
11/22/97	Tommy Jacks				,	,
, ,		State; Zip Code		250.00	 	
			!		I	
	111 Congress Ave #	1010 Austin, T	X 78701			
Principal occu	pation	1	10 Employer (option	al)		
Date	Full name of contributor		out of state PAC	Amount of	In-kind (contribution
		_		contribution (\$)	description	(if applicable)
12/9/97	Stuart & Jeanette Contributor address; City	Kindra ; State; Zip Code		500.00] 	
	800 Brazos #1010 A	ustin, TX 7870)1		<u> </u>	
Principal occu	pation		Employer (option	al)		
Date	Full name of contributor		out of state PAC	Amount of		contribution
12/2/97	Dale Linebarger			contribution (S)	description	(if applicable)
, _, _,		; State; Zip Code	• • • • • • • • • • • • • • • • • • • •	500.00	 	
					1	
	PO Box 17428 Austi	n, TX 78760			<u> </u>	
Principal occu	pation		Employer (option	al)		
Date	Full name of contributor		out of state PAC	Amount of	•	contribution
9/19/97	David Botsford	_		contribution (\$)	description	i(if applicable)
	Contributor address; City	; State; Zip Code	••••••	500.00	 	
	1307 West Ave Aust	in, TX 78701				
Principal occi	upation		Employer (option	nal)		
Date	Full name of contributor		out of state PAC	Amount of		contribution
10/1/97	Filen Mason-Orton			contribution (\$)	Jescription	n(if applicable)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Contributor address; City; State; Zip Code

50.00

Employer (optional)

Principal occupation

Austin, TX

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

P.O. Box 12070

SCHEDULE A

OTHER	THAN I EEDOEG GR EGY			
The Instruction	GUIDE explains how to complete this form.		1 Total pages Scher	dule A: 16 of 18
2 FILER NAME			3 ACCOUNT # (Eth	ics Commission filers)
Ken Oden				
4 Date	_	out of state PAC	7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)
9/25/97	David Quintanilla 6 Contributor address: City; State; Zip Code		50.00	
	Manchaca, TX			
9 Principal occur	pation	10 Employer (option	al)	
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
9/24/97	Franklin Scott Spears, JR			
	Contributor address; City; State; Zip Code		25.00	
	901 Mopac Expressway South Aust	in TY 78716		
Principal occu		Employer (option	ai)	
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
9/24/97	Dr. M. James Moritz Contributor address; City; State; Zip Code		15.00	
	3303 Northland Dr #201 Austin,	ГХ 78731		
Principal occu	pation	Employer (option	al)	
Date		out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
9/28/97	Bobby Inman Contributor address; City; State; Zip Code	• • • • • • • • • • • • • • • • • •	100.00	1 1
	Austin, TX]
Principal occu	pation	Employer (option	aal)	
Date	Full name of contributor	out of state PAC	Amount of	In-kind contribution
9/19/97	Philip R. Presse		contribution (\$)	description(if applicable)
	Contributor address; City; State; Zip Code	•••••	100.00	
	819 1/2 W. 11th Street Austin,	TX 78701		
Principal occu	upation	Employer (option	nai)	

* Texas Ethics Commission

POLITICAL CONTRIBUTIONS

SCHEDULE A

OTHER	THAN PLEDGES OR LOAN	IS		
The Instruction	N GUIDE explains how to complete this form.		1 Total pages Sche	dule A: 17 of 18
2 FILER NAME	=		3 ACCOUNT # (Eth	ics Commission filers)
Ken Oden				
4 Date	5 Full name of contributor	out of state PAC	7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)
10/1/97	C. Patrick Oles, JR. 6 Contributor address; City; State; Zip Code		100.00	
	1502 Hardouin Austin, TX 78703			
9 Principal occu		10 Employer (option	al)	
Date		out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
9/16/97	Jenkens & Gilchrist Contributor address; City; State; Zip Code		250.00	
	1445 Ross Ave Ste #3200 Dallas.	TX 75202		
Principal occu	1	Employer (option	al)	
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
9/23/97	Lea & Chamberlain Contributor address; City; State; Zip Code		50.00	
	Congress Ste #1800 Austin, TX 7	8701]
Principal occu	pation	Employer (option	nal)	
Date	Full name of contributor	out of state PAC	Amount of contribution (\$)	In-kind contribution description(if applicable)
9/23/97	Higers & Watkins Contributor address; City: State: Zip Code		250.00	1 1
	PO Box 2063 Austin, TX 78768			
Principal occu	upation	Employer (option	nai)	
Date	Full name of contributor	out of state PAC	Amount of	In-kind contribution
10/1/97	Stan Schlueter		contribution (\$)	description(if applicable)
	Contributor address; City; State; Zip Code	••••••	250.00]
	PO Box 162224 Austin, TX 78716	,		
Principal occu		Employer (option	nai)	

(512) 463-5800

1-800-325-8506

POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 Total pages Schedule A: The Instruction Guide explains how to complete this form. 18 of 18 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Ken Oden In-kind contribution 5 Full name of contributor out of state PAC 7 Amount of Date contribution (\$) description(if applicable) 10/1/97 Leslie L. Canter 50.00 6 Contributor address; City; State; Zip Code PO Box 164015 Austin, TX 78716 10 Employer (optional) Principal occupation Amount of In-kind contribution out of state PAC Date Full name of contributor description(if applicable) contribution (\$) Contributor address; City; State; Zip Code Employer (optional) Principal occupation In-kind contribution Amount of Date Full name of contributor out of state PAC description(if applicable) contribution (\$) Contributor address; City; State; Zip Code Employer (optional) Principal occupation Amount of In-kind contribution Date Full name of contributor ut of state PAC contribution (\$) description(if applicable) Contributor address; City; State; Zip Code Principal occupation Employer (optional) Amount of In-kind contribution Date Full name of contributor ut of state PAC description(if applicable) contribution (\$) Contributor address; City; State; Zip Code Employer (optional) Principal occupation

Texas Ethics Commission

Date	Payee name		Amount (\$)
9/15/97	American Printers Exchange Payee address; City; State; Zip Code 630 Camion Austin, TX 78752		279.28
Purpose of ex	penditure	Complete if direct expenditure to benef	it C/OH Office sought / held

Stationery & Envelopes

Candidate / Officeholder name

Office sought / held

xas Ethics Commis	sion P.O. Box 12070 Austin, Texas 7871	1-2070	(512)46	3-5800 1-800-325-8506
	AL EXPENDITURES	-	. • •	SCHEDULE F
The Instruction	Guide explains how to complete this form.		1 Total pages S	Schedule F: 3 of 4
FILER NAME Ken Oden		·	3 ACCOUNT#	(Ethics Commission filers)
Date	5 Payee name			7 Amount (\$)
9/18/97	Ken Oden 6 Payee address: City: State; Zip Code			894.00
	1506 Gaston Ave Austin, TX 78703		enditure to benefi	t C/OH ••
Reimburseme Constituent	ent for reception with	Candidate / Officeholder	name	Office sought / held
Date	Payee name			Amount (\$)
9/30/97	Travis County Democratic Party Payee address; City; State; Zip Code			250.00
	505 West Lynn Street Austin, TX	78703 - Complete if direct exp	penditure to benef	it C/OH ••
Purpose of exp		Candidate / Officeholde	r name	Office sought / held
Date	Payee name			Amount (\$)
10/24/97	Ken Oden Payee address; City; State; Zip Code			682.67
	1506 Gaston Ave. Austin, TX 787	03		
Purpose of ex		Complete if direct ex Candidate / Officeholde	penditure to bene er name	fit C/OH Office sought / held
	ent for food, Hispanic Bar n Reception expenses			
Date	Payee name			Amount (\$)
11/13/97	Ken Oden Payee address; City; State; Zip Code			179.56
	1506 Gaston Ave Austin, TX 7870	3		
Purpose of e		 Complete if direct e Candidate / Officehold 	xpenditure to beni er name	efit C/OH •• Office sought / held

P.O. Box 12070

POLITI	CAL EXPENDITURES	-		SCHEDULE F
The Instruction	Guide explains how to complete this form.		1 Total pages S	Schedule F: 4 of 4
FILER NAM	E		3 ACCOUNT#	(Ethics Commission filers)
4 Date	5 Payee name			7 Amount (S)
12/19/97	Ken Oden 6 Payee address; City; State; Zip Code			287.59
	1506 Gaston Ave Austin, TX 787	703		
8 Purpose of e	xpenditure	9 Complete if direct experimental Candidate / Officeholder r		t C/OH Office sought / held
Reimburse	ment for food expenses			
Date	Payee name			Amount (\$)
12/22/97	Chris Saunders Payee address: City; State; Zip Code			1061.00
	3713 Windsor Rd. Austin, TX 783	703		
Purpose of e	xpenditure	Complete if direct expe Candidate / Officeholder	nditure to benef	it C/OH •• Office sought / held
Consultin	g and Administration of fundraising			
Date-	Payee name			Amount (\$)
1/14/98	Ken Oden			(9)
	Payee address; City: State; Zip Code	•		495.89
ı	1506 Gaston Ave Austin, TX 78	703		
Purpose of	expenditure	Complete if direct expended to Candidate / Officeholder	enditure to bene name	fit C/OH. ⊶ Office sought / held
Reimburse	ment for food expenses			
Date	Payee name			Amount (\$)
	Payee address; City; State; Zip Code			
Purpose of	expenditure	→ Complete if direct exp Candidate / Officeholder	enditure to bene name	office sought / held
	ATTACH ADDITIONAL COPIE	S OF THIS FORM AS N	IEEDED	

POLITICAL EXPENDITURES SCHEDULE G MADE FROM PERSONAL FUNDS 1 Total pages Schedule G: The Instruction Guide explains how to complete this form. 1 of 8 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Ken Oden 5 Payee name Date Amount (\$) Austin Rent-All 7/30/97 6 Payee address; City; State; Zip Code 23.82 5605 Burnet Rd Austin, TX 78756 Reimbursement 7 Purpose of expenditure from political contributions Hispanic Bar Association Reception intended Amount Date Payee name Party Pig (\$) 7/30/97 Payee address; City; State; Zip Code 33.04 2900 West Anderson Austin, TX Purpose of expenditure Reimbursement from political contributions intended Hispanic Bar Association Reception Payee name Amount Date Sam's Club (\$) 7/30/97 Payee address; City; State; Zip Code 98.70 Austin, TX Purpose of expenditure Reimbursement from political contributions Hispanic Bar Association Reception intended Amount Date Payee name Capitol Book Store (\$) 7/30/97 Payee address; City; State; Zip Code 76.21 1400 Congress Ave Austin, TX 78701 Purpose of expenditure Reimbursement from political contributions Hispanic Bar Association Reception intended Date Amount Capitol Gift Shop (\$) 7/30/97 Payee address: City; State; Zip Code 114.31 112 East 11th Street Austin, TX 78701 Purpose of expenditure Reimbursement from political contributions Hispanic Bar Association Reception intended ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

P.O. Box 12070

SCHEDULE G

The Instruct	non Guide explains how to complete this form.	1 Total pages Sched	dule G: 2 of 8	
FILER NA		3 ACCOUNT # (Ethi	ics Commission filers)	
Ken Ode	n			
Date	5 Payee name		8 Amount (\$)	
8/4/97	Dean Johnson, Inc. 6 Payee address; City; State; Zip Code		63.00	
	Austin, TX			
	7 Purpose of expenditure		Reimbursement from political	
	Hispanic Bar Association Reception		contributions intended	
Date 8/14/97	Payee name Chris Saunders Payee address; City: State; Zip Code		Amount (\$) 400.00	
			400.00	
	3713 Windsor Rd Austin, TX 78703			
	Purpose of expenditure		Reimbursement from political contributions	
	Consulting and Administration of fundrai	sinq	intended	
Date 8/18/97	Payee name Black Voters Action Project Payee address; City; State; Zip Code		Amount (\$) 50.00	
	Austin, TX			
	Purpose of expenditure		Reimbursement from political	
	Donation		contributions intended	
Date 8/20/97	Payee name Miltos Pizza Pub Payee address: City; State; Zip Code		Amount (\$) 24.89	
		-		
	2909 Guadalupe Austin, TX 78705 Purpose of expenditure		Reimbursement from political	
	Meeting with constituent		contributions intended	
Date	Payee name Magnolia Cafe		Amount (\$)	
8/27/97	Payee address; City; State; Zip Code		30.00	
	1920 South Congress Ave Austin, TX 787	04		
	Purpose of expenditure		Reimbursement from political	
	Meeting with constituent		contributions	

	AL EXPENDITURES ROM PERSONAL FUNDS	(512)463-586 S	00 1-800-325-8500
The Instruction	GUIDE explains how to complete this form.	Total pages Schedule G:	3 of 8
FILER NAME	3	ACCOUNT # (Ethics Com	mission filers)
4 Date	5 Payee name	8	Amount (\$)
9/12/97	Shoreline Grill 6 Payee address; City; State; Zip Code		230.00
	98 San Jacinto Austin, TX 78701 7 Purpose of expenditure Meeting with Press Representative and Staff	Ţ.	Reimbursement from political contributions intended
Date	Payee name Shoreline Grill		Amount (\$)
9/12/97	Payee address; City; State; Zip Code		100.00
	98 San Jacinto Austin, TX 78701		
	Purpose of expenditure Meeting with Press Representative and Staff		Reimbursement from political contributions intended
Date	Payee name Louie's 106		Amount (\$)
9/17/97	Payee address; City; State; Zip Code		32.60
	Austin, TX		
	Purpose of expenditure Meeting with constituent	X	Reimbursement from political contributions intended
Date	Payee name Paramount Theatre Payee address; City; State; Zip Code		Amount (\$)
9/27/97	Payee address. Only, Clair, 2-p cool		32.00
	713 Congress Ave Austin, TX 78701 Purpose of expenditure		Reimbursement from political
	Grid Iron Show		contributions intended
Date	Payee name Lobby Lounge		Amount (\$)
9/28/97	Payee address; City; State; Zip Code		90.07
	Four Seasons Hotel Austin, TX		
	Purpose of expenditure	K	from political
	Meeting with constituents		contributions intended

1-800-325-8506

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The Instruction Guide explains how to complete this form.		1 Total pages Sched	lule G : 4 of 8	
FILER NAM Ken Oder		3 ACCOUNT# (Ethi	cs Commission filers)	
Date	5 Payee name		8 Amount	
0/28/97	Greater Mt. Zion Baptist Church 6 Payee address; City; State; Zip Code		(s) 25.00	
	Austin, TX			
	7 Purpose of expenditure		Reimbursement from political	
	Donation .		contributions intended	
Date	Payee name Manuels		Amount (\$)	
10/8/97	Payee address; City; State; Zip Code		43.33	
	Austin, TX			
	Purpose of expenditure		Reimbursement from political contributions	
	Meeting with Judge and constituents		intended	
Date	Payee name Bennigan's		Amount (\$)	
10/10/97	Payee address; City; State; Zip Code		58.81	
	Austin, TX			
	Purpose of expenditure		Reimbursement from political contributions	
	Meeting with Constituents		intended	
Date	Payee name		Amount (\$)	
10/26/97	Threadgill's Payee address: City; State; Zip Code		45.42	
•	301 Riverside Dr. Austin, TX	•		
	Purpose of expenditure		X Reimbursement from political	
	Meeting with constituents		contributions intended	
Date	Payee name The Bitter End		Amount (\$)	
10/30/97	Payee address; City; State; Zip Code		28.70	
	311 Colorado St. Austin, TX 78701			
	Purpose of expenditure		Reimbursement from political	
	Meeting with constituent		contributions intended	

P.O. Box 12070

SCHEDULE G

1-800-325-8506

The Instruction Guide explains how to complete this form.		5 of 8		
2 FILER NAME 3 ACCOUNT # (Ethica				
Ken Oden				· · · · · · · · · · · · · · · · · · ·
Date	5 Payee name		8	Amount (\$)
	Shoal Creek Saloon		1	4.14
10/31/97	6 Payee address; City, State; Zip Code		1	.4.14
	3710 Enfield Austin, TX 78703			
	7 Purpose of expenditure			Reimbursement from political
	Meeting with contituent			contributions intended
Date	Payee name			Amount
2	West Lynn Cafe			(\$)
11/3/97	Payee address; City; State; Zip Code		2	28.04
	1110 West Lynn Austin, TX 78703			
	Purpose of expenditure			Reimbursement from political
	Meeting with Constituent			contributions intended
Date	Payee name			Amount
	Sullivan's		-	(\$)
11/6/97	Payee address; City; State; Zip Code		1	135.83
	Austin, TX			
	Purpose of expenditure			Reimbursement from political
	Meeting with Judges		<u> </u>	contributions intended
Date	Payee name			Amount (\$)
	Hyde Park Bar & Grill Payee address: City; State; Zip Code		1	
11/11/97	Payee address; City; State; Zip Code			34.07
	Austin, TX		_	
	Purpose of expenditure			Reimbursement from political contributions
	Meeting with constituent			intended
Date	Payee name			Amount (\$)
	Mezzaluna Ĉucina		1	
11/14/97	Payee address; City; State; Zip Code		4	43.15
	Austin, TX			
	Purpose of expenditure			Reimbursement from political
	Meeting with constituent			contributions intended

SCHEDULE G

1-800-325-8506

The Instruction	ON GUIDE explains how to complete this form.	1 Total pages Sched	ule G : 6 of 8
2 FILER NAM	E	3 ACCOUNT # (Ethic	s Commission filers)
Ken Oden			
4 Date	5 Payee name	ì	8 Amount (\$)
11/15/97	Chez Zee Bakery & Cafe 6 Payee address; City; State; Zip Code		78.70
	Austin, TX 78731		
	7 Purpose of expenditure		Reimbursement from political contributions
	Meeting with constituents		intended
Date	Payee name Guero's Taco Bar		Amount (\$)
11/21/97	Payee address; City; State; Zip Code		13.39
	1412 South Congress Ave Austin, TX		
	Purpose of expenditure		Reimbursement from political
	Meeting with constituent		contributions intended
Date 12/04/97	Payee name Colonial Room Payee address; City; State; Zip Code		Amount (\$)
			27.00
	San Antonio, TX		
	Purpose of expenditure		Reimbursement from political contributions
*-	Meeting with staff		intended
Date	Payee name The Bitter End		Amount (\$)
12/1/97	Payee address; City; State; Zip Code		61.21
	311 Colorado Street Austin, TX 78701		
	Purpose of expenditure		Reimbursement from political
	Meeting with constituent		contributions intended
Date	Payee name Landry's		Amount (\$)
12/2/97	Payee address; City; State; Zip Code		29.32
	Austin, TX		
	Purpose of expenditure		Reimbursement from political
	Meeting with constituent		contributions intended

P.O. Box 12070

SCHEDULE G

The Instruction Guide explains how to complete this form.		dule G: 7 of 8	
FILER NAM Ken Oder		3 ACCOUNT # (Eth	ics Commission filers)
Date	5 Payee name Broadway 5050		8 Amount (\$)
12/5/97	6 Payee address; City; State; Zip Code		50.00
	5050 Broadway San Antonio, TX 78209		
	7 Purpose of expenditure Meeting with Staff		Reimbursement from political contributions intended
Date	Payee name Sfuzzi		Amount (\$)
12/9/97	Payee address; City; State; Zip Code		49.76
	Austin, TX Purpose of expenditure		Reimbursement from political contributions
	Meeting with County Official & Constit	uent	intended
Date	Payee name The Caucus Club		Amount (\$)
12/22/97	Payee address; City; State; Zip Code		76.00
	Austin, TX		
•	Purpose of expenditure Meeting with Constituent		Reimbursement from political contributions intended
Date	Payee name Frost Bank		Amount (\$)
7/97 to 12/97	Payee address; City; State; Zip Code		42.00
12/97	Austin, TX Purpose of expenditure		Reimbursement from political contributions intended
Date	Activity Charges Payee name		Amount
7/28/97 to	Travis County Democratic Party Payee address; City; State; Zip Code		60.00
12/28/97	Austin, TX		
	Purpose of expenditure Sustaining member monthly dues		Reimbursement from political contributions intended

Texas Ethics Commission

POLITICAL EXPENDITURES

SCHEDULE G

The Instruction Guide explains how to complete this form.		ule G: 8 of 8	
FILER NAM	E 3	ACCOUNT # (Ethic	s Commission filers)
Ken Oden			
Date	5 Payee name		8 Amount (\$)
8/1/97	Castle Hill Cafe 6 Payee address: City: State: Zip Code		29.33
	Austin, TX		
	7 Purpose of expenditure		Reimbursement from political contributions
	Meeting with constituent		intended
Date	Payee name Mezzaluna		Amount (\$)
8/5/97	Mezzaluna Payee address; Cify; State; Zip Code		123.83
	Austin, TX		V
	Purpose of expenditure		Reimbursement from political contributions
	Meeting with constituent		intended
Date	Payee name		Amount (\$)
1/5/98	Lobby Lounge Payee address: City; State; Zip Code		59.12
	Four Seasons Hotel Austin, TX 78701		,,
	Purpose of expenditure		Reimbursement from political contributions intended
	Meeting with constituent		Amount
Date	Payee name Laura's Bluebonnet Kitchen		(\$)
1/8/98	Payee address; City; State; Zip Code	•	29.96
	5408 Burnet Rd Austin, TX 78756		
	Purpose of expenditure		from political contributions intended
	Meeting with constituent		Amount
Date	Payee name The Bitter End		(\$)
12/7/97	Payee address; City; State; Zip Code		12.50
	311 Colorado Street Austin, TX 78701		
	Purpose of expenditure		Reimbursement from political contributions
	Meeting with constituent		intended